

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

For Official Use

State of Wisconsin, Petitioner

-vs-

**Order for
Supervised Release**

_____, Respondent

Name

Case No. _____

Date of Birth

THE COURT ORDERS:

1. The respondent is granted supervised release and is committed to the Department of Health and Family Services for supervision subject to the:
 - Attached conditions established by the court; and
 - Rules of supervision established by the Department of Health and Family Services.
 - Approved Supervised Release Plan developed by the Department of Health and Family Services.
 - ☐ Supervised Release Plan attached.
 - ☐ The respondent will comply with antiandrogen medication; whoever administers the medication or treatment to the respondent shall observe appropriate medical standards.
2. The sheriff shall deliver the respondent into the custody of the Department of Health and Family Services.
3. The Department of Health and Family Services shall arrange for the respondent's release on or before (date) _____.

Distribution:

1. Court (Original)
2. Attorney for county or state (whichever applicable)
3. Defense Attorney
4. Department of Health and Family Services (Institution)
5. Department of Corrections
6. §51.42 Board (of county of respondent's residence)
7. Sheriff (of county where respondent will reside)
8. Municipal police dept. (where respondent will reside)

BY THE COURT:

Circuit Court Judge/Clerk of Court

Name Printed or Typed

Date